



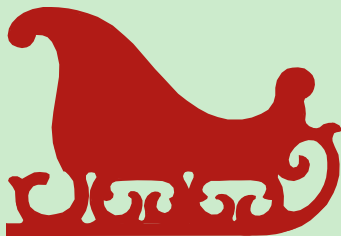
# December 2004

## SEASON'S GREETINGS



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**H**appy Holiday to you all! This is the latest edition of the CADDIS newsletter that will be published monthly. The newsletter will be posted on the CADDIS website, designed to share more detailed information on specific areas of the project.

In addition to the newsletter, we are working with a Communications Team to coordinate features on the website that will be updated weekly. We will use the website to publish answers to questions asked during our regional center visits, as well as share information pertinent to planning as we move forward with the schedule. We will notify you in January when the website is restructured. Please give us feedback on whether or not this new format is valuable to you.



## CADDIS/Regional Center Road Trip!

by Beverly Humphrey, Stephani Long and Becky Pipoly

**T**hus far we have visited fourteen regional centers, beginning the last week of September through mid-November. Meeting with Executive Directors and staff gave us the opportunity not only to sit down and talk with people who will be critical to the success of the project, but also to understand more about the unique challenges each regional center is facing.

Our agenda was somewhat informal; we wanted to explain changes in the Deloitte team structure and the new project approach, explore regional center concerns, and solicit recommendations and ideas that would help us improve the overall effectiveness of the project. Conversations lasted anywhere from two to five hours, and the number of participants ranged from one to as many as twenty-five people.

All regional centers expressed concerns about budget cuts, reduced staffing and increased workload. Consequently, they underscored that response time will be essential to conducting business effectively. Efficiency was also identified as critical, so features such as the elimination of duplicate data entry throughout the system are considered vital to success. Built-in edits will also enhance efficiency by reducing errors and improving the data being inputted.

Certainly the fiscal side of CADDIS remains a concern for everyone, since these modules did not work during User Acceptance Testing. Fiscal staff and management are eagerly awaiting a demo to see how the application will support their business needs. *After the application-testing phase is complete, we plan to preview the demo in several locations throughout the State.*

Training continues to be an important issue for most regional centers. Staff felt that training materials need to be more detailed and more useful to the end user by following the business process flow. Documentation will be important in helping with staff turnover. In addition, training needs to be specific to application concepts, new terminology and application features. *To assist regional center technical staff developing RC-specific reports, DDS also plans to offer database and ad hoc report training.*

Assisting the regional centers in transitioning from their documented workflows (the toolkit) to the CADDIS workflows was another critical area identified in our discussions. To facilitate this transition, we recently held two sessions in Sacramento with regional center work groups to identify common processes. Following those sessions, we sent a DDS/Deloitte team to both North L.A. and East Bay for two days each, to help improve our understanding of the major business processes and workflow in the field. *Once we have analyzed this information, we will be working closely with each regional center to give them the necessary support in mapping their processes.*

Other areas of concern identified in our discussions included: the need for multiple sessions, the IFSP process, IPP signatures and security issues, the need for offline capability, changes to the SIRS module, the workload impact of CDER changes, check printing, E-billing, and current CADDIS nomenclature. *At this point we don't have definitive answers for these issues, but they are all being worked on.*

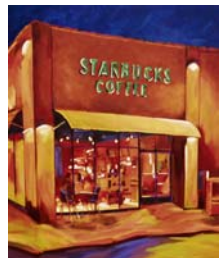
In the course of our conversations, many helpful suggestions were proposed. For example, if super users were allowed to practice with stabilized functions as they are fixed, this would build expertise early on at the regional centers and be helpful during rollout. *We hope to implement this idea as soon as the individual functions are thoroughly tested and will keep you updated on our progress.*

Lastly, each regional center emphasized the importance of communication as being critical to the success of the project, and we agree. Essentially, people felt the Weekly Updates were not substantive, and they offered suggestions as to the type of information that would be more valuable: e.g., what other regional centers are doing; what's working; what the DDS/Deloitte team is doing; how the project is progressing; what policy decisions are being made; what is on the enhancement list; and, what are some best practices. *We are putting together a team responsible for improving communication to be more helpful to the regional centers. We need to focus on more frequent communication with regional center CADDIS contacts and other more formal groups, as well as improve our Website as a vehicle for updating people and sharing information. We're also planning to provide a monthly newsletter, such as this, highlighting a few areas we feel would be of interest. Please give us feedback about this format, as well as any suggestions for topics.*

**Future Plans:** A DDS/Deloitte technical team will be visiting Orange County this month to gain a more in depth understanding of the Virtual Chart product and its offline functionality. Meanwhile, we are looking forward to visits to Lanterman, South Central, TriCounties, San Gabriel/Pomona, Harbor and Eastern L.A. this month. We will update you on our travels in the next newsletter.

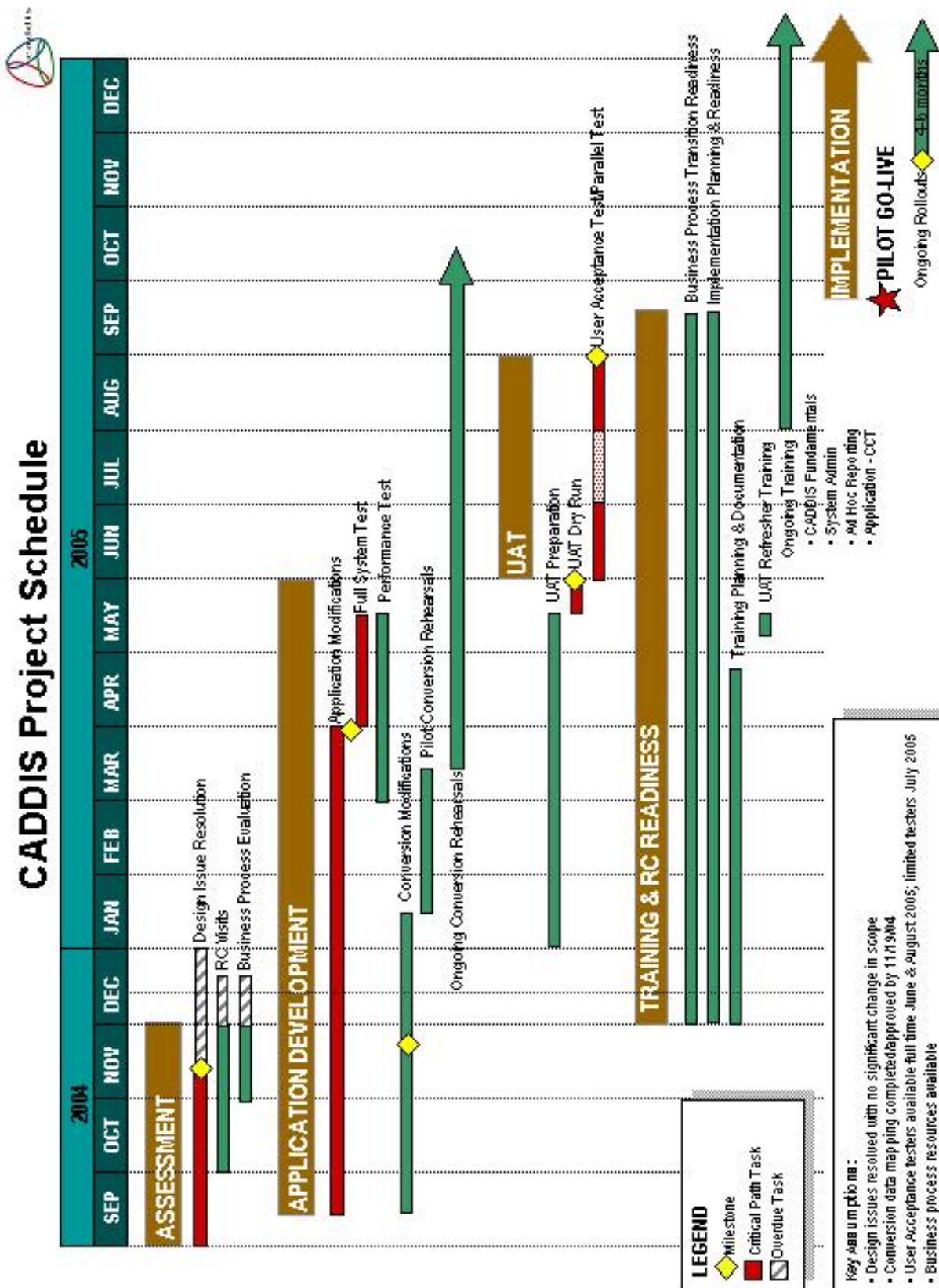


Thank you for your hospitality and the time you've given us to share your thoughts and concerns. We wish you a very safe and happy holiday season.





# CADDIS Project Schedule



# New Project Schedule

A revised schedule was developed following the decision to stop User Acceptance Testing at the pilot regional centers. New Deloitte Project Team members came on board in early September and adopted an integrated approach to testing the system. They organized into six major functional areas: Consumer, Provider, Fiscal, Purchase of Service, Trust, and Administration. The Team has gone back to development, focusing on functionality of the application. At the same time, the DDS Project Team is reviewing and resolving outstanding design, functional and technical issues.



The new schedule covers five major activities:

- **Assessment**

The Deloitte Project Team is working with DDS to perform critical activities such as: ensuring all design issues that impact development and testing of the application get resolved, visiting Regional Centers (RCs) so they are aware of the approach and schedule changes, and analyzing critical business processes to align the related training materials.

- **Application Development**

The entire application is being retested, with defects being prioritized and fixed. This task is scheduled to complete by 3/31/2005. It will be followed by a six-week period of full system test.

A performance test is planned from March through mid-May 2005.

Just like the core CADDIS application, the Conversion software is being retested, analyzed and fixed. This activity will continue through mid-January. Multiple rehearsals for all RCs are being planned; pilot rehearsals will commence mid-January and last through mid-March.

- **User Acceptance Testing (UAT)**



UAT preparation activities will commence in January 2005. A UAT refresher training has been planned for the pilot RCs in the 2<sup>nd</sup> week of May 2005 to prepare the UAT testers. A two-week UAT dry run is planned in the latter part of May 2005, so the Project Team can ensure the UAT environment is ready and everything is in place to start UAT.

UAT will then begin in June 2005 and will last through August 2005. There is a planned slowdown in UAT activities in the RCs in July 2005 because of their fiscal closing. During this period, the Project Team will resolve defects found in June and get ready for the next wave of UAT in August.

- **Training and Regional Center Readiness**

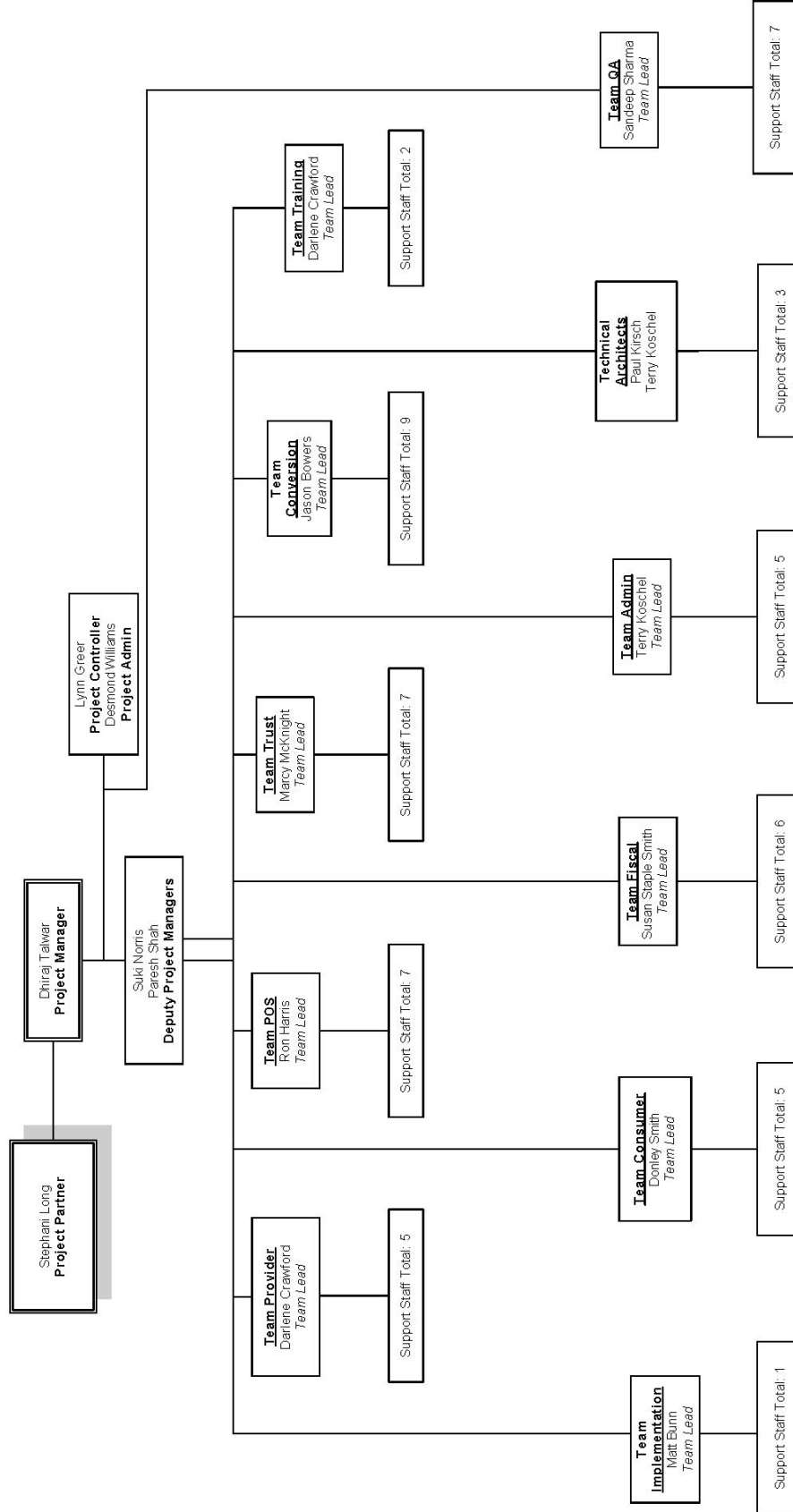
These activities will begin as early as December 2004. The focus will be on business process transition readiness, training, and implementation readiness. As part of the Assessment phase, the Project Team will analyze the critical business processes in the RCs. This knowledge will then be used to tailor the training curricula and other activities related to implementation readiness. Quick reference guides for the critical processes will be developed, and training materials will be updated to reflect recent and planned changes to the CADDIS application.

- **Implementation**

Pilot go-live is scheduled for late September 2005 and will continue for 2 months. The remaining RCs will roll out in the 4-6 month period following the Pilot test,



Many changes have taken place on the CADDIS Project during the last month, staffing being just one. To familiarize you with the new names and structure of the CADDIS Contractor staff, we have attached an organizational chart listing the leadership, functional area teams and team leaders.





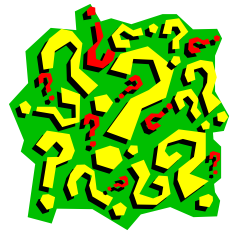
## Frequently Asked Question (FAQ) of the Month



### Q : How will the revised CDER convert into CADDIS?

A : The CADDIS conversion team has been working to identify areas in the Revised CDER that will convert to CADDIS. It will not be necessary to input an entirely new CDER in CADDIS. The first CDER will initiate a prompt from CADDIS to “convert as much as possible.” As that prompt indicates, not all CDER information in the revised items will convert to CADDIS.

The entire *Evaluation Element* has been revised and none of these items can be converted in CADDIS. In addition, three sections within the *Diagnostic Element* have items in which current response options have been eliminated and/or replaced. Depending on the option currently recorded, the following items may not convert in CADDIS:



- Presence of Cerebral Palsy (Item 17);
- Level of Motor Dysfunction (Item 19);
- Presence of Autistic Disorder (Item 23);
- Epilepsy and Seizure Disorders (Items 27a, 28a, and 29a)
- Condition Impact (Items 22, 26, 27c, 28c and 29c)

Likewise, the Condition Impact items within the Mental Disorders (Items 50c, 51c, 52c and 53 c) and Chronic Major Medical Conditions (Items 54b, 55b, 56b, 57b, 58b and 59b) may be impacted. The options for indicating Condition Impact in these sections will be consistent with the revisions made to these same items in the Cerebral Palsy, Autism and Epilepsy/Seizure Disorders sections. The amount of data that cannot be converted for the Condition Impact items is minimal.

Also within the *Diagnostic Element*, the existing Diagnostic Codes for Mental Disorders cannot be converted. CADDIS will include DSM-IV-TR codes rather than DSM-III codes. A crosswalk will be provided to regional centers to assist in replacing the DSM-III codes in the existing CDER with the appropriate DSM-IV-TR codes in CADDIS.

DDS is currently collecting data to assess the workload impact in each of the areas that will need to be converted manually.